

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

RECEIVED

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Office Use Only

FEC MAIL CENTER

12FE4M5

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

PRO-LIFE SUPER PAC

ADDRESS (number and street)

P.O. BOX 35404



Check if different
than previously
reported. (ACC)

TULSA

OK

74153

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C 00513697

3. IS THIS
REPORT



NEW
(N)

OR



AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:



April 15
Quarterly Report (Q1)



July 15
Quarterly Report (Q2)



October 15
Quarterly Report (Q3)



January 31
Year-End Report (YE)



July 31 Mid-Year
Report (Non-election
Year Only) (MY)



Termination Report
(TER)

(b) Monthly
Report
Due On:



Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)



Nov 20 (M11)
(Non-Election
Year Only)



Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)



Dec 20 (M12)
(Non-Election
Year Only)



Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on



in the
State of



(d) 30-Day
POST-Election
Report for the:



General (30G)



Runoff (30R)



Special (30S)

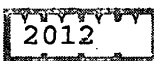
Election on



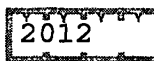
in the
State of



5. Covering Period



through



I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

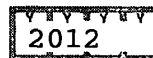
Type or Print Name of Treasurer

DANIEL SKERBITZ

Signature of Treasurer

Daniel Skerbitz

Date



NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only

FEC FORM 3X
Rev. 12/2004

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

PRO-LIFE SUPER PAC

Report Covering the Period:

From:

01 / 01 / 2012

To:

03 / 31 / 2012

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2012		0
(b) Cash on Hand at Beginning of Reporting Period.....	0	
(c) Total Receipts (from Line 19)	1 3 5 1 2 6 0	1 3 5 1 2 6 0
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	1 3 5 1 2 6 0	1 3 5 1 2 6 0
7. Total Disbursements (from Line 31)	1 2 9 0 8 7 8	1 2 9 0 8 7 8
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	7 0 3 8 2	7 0 3 8 2
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

PRO-LIFE SUPER PAC

Report Covering the Period:

From:

01 / 01 / 2012

To:

03 / 31 / 2012

I. Receipts

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other
Than Political Committees

(i) Itemized (use Schedule A).....

(ii) Unitemized.....

(iii) TOTAL (add
Lines 11(a)(i) and (ii)).....▶

(b) Political Party Committees.....

(c) Other Political Committees
(such as PACs).....

(d) Total Contributions (add Lines
11(a)(iii), (b), and (c)) (Carry
Totals to Line 33, page 5).....▶

12. Transfers From Affiliated/Other
Party Committees.....

13. All Loans Received.....

14. Loan Repayments Received.....

15. Offsets To Operating Expenditures
(Refunds, Rebates, etc.)
(Carry Totals to Line 37, page 5).....

16. Refunds of Contributions Made
to Federal Candidates and Other
Political Committees.....

17. Other Federal Receipts
(Dividends, Interest, etc.).....

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account
(from Schedule H3).....

(b) Levin Funds (from Schedule H5).....

(c) Total Transfers (add 18(a) and 18(b))..

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c)).....▶

20. Total Federal Receipts
(subtract Line 18(c) from Line 19).....▶

1 2 9 0 0 0 0

7 1 2 6 0

1 3 6 1 2 6 0

1 3 6 1 2 6 0

1 3 6 1 2 6 0

1 3 6 1 2 6 0

1 2 9 0 0 0 0

7 1 2 6 0

1 3 6 1 2 6 0

1 3 6 1 2 6 0

1 3 6 1 2 6 0

1 3 6 1 2 6 0

COLUMN B
Calendar Year-to-Date

-
- 1 2 7 2 9 8 5
- 1 7 8 9 3
- 1 2 9 0 8 7 8
- 1 2 9 0 8 7 8

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Ex- **penditures**

COLUMN A **Total This Period**

COLUMN B **Calendar Year-to-Date**

- 33. Total Contributions (other than loans)
(from Line 11(d), page 3)
- 34. Total Contribution Refunds
(from Line 28(d))
- 35. Net Contributions (other than loans)
(subtract Line 34 from Line 33)
- 36. Total Federal Operating Expenditures
(add Line 21(a)(i) and Line 21(b))
- 37. Offsets to Operating Expenditures
(from Line 15, page 3)
- 38. Net Operating Expenditures
(subtract Line 37 from Line 36)

1 3 6 1 2 6 0						
1 3 6 1 2 6 0						

1 3 6 1 2 6 0						
1 3 6 1 2 6 0						

12030811937

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1 OF 3

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)

PRO-LIFE SUPER PAC

A. Full Name (Last, First, Middle Initial)
ATWELL, ROBERT B.

Mailing Address

111 N WASHINGTON ST

City

GREEN BAY, WI 54301

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

NICOLET NATIONAL BANK

Occupation

BANKER

Receipt For:

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2 0 0 0 0 0

Date of Receipt

02 / 22 / 2012

Amount of Each Receipt this Period

2 0 0 0 0 0

B. Full Name (Last, First, Middle Initial)
LARSON, BRUCE C.

Mailing Address

126 W 1ST ST

City

HINDSDALE, IL 60521

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

LARSON EYE CENTER

Occupation

DOCTOR

Receipt For:

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3 0 0 0 0 0

Date of Receipt

02 / 23 / 2012

Amount of Each Receipt this Period

3 0 0 0 0 0

C. Full Name (Last, First, Middle Initial)
COSTELLO, J. KEVIN

Mailing Address

600 N DEARBORN UNIT 1401

City

CHICAGO, IL 60654

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

RESTAURANT OWNER

Receipt For:

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1 0 0 0 0 0

Date of Receipt

02 / 24 / 2012

Amount of Each Receipt this Period

1 0 0 0 0 0

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 2 OF 3

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PRO-LIFE SUPER PAC

Full Name (Last, First, Middle Initial)

A. ESSHAKI, KEITH M.

Mailing Address

9855 BUSINESS PARK AVE

City

SAN DIEGO, CA 92131

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

GTC SYSTEMS

Occupation

CEO

Receipt For:

☒ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1 0 0 0 0 0

Date of Receipt

03

02

2012

Amount of Each Receipt this Period

1 0 0 0 0 0

Full Name (Last, First, Middle Initial)

B. SCHARLAU, JOHN

Mailing Address

N6938 810TH ST

City

ELK MOUND, WI 54739

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

REAL ESTATE

Receipt For:

☒ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1 0 0 0 0 0

Date of Receipt

03

02

2012

Amount of Each Receipt this Period

1 0 0 0 0 0

Full Name (Last, First, Middle Initial)

C. BROWN, CRYSTAL

Mailing Address

23341 FRIAR ST

City

WOODLAND HILLS, CA 91367

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

BUSINESS OWNER

Receipt For:

☒ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5 0 0 0 0

Date of Receipt

03

02

2012

Amount of Each Receipt this Period

5 0 0 0 0

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 3 OF 3

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PRO-LIEE SUPER PAC

Full Name (Last, First, Middle Initial)

A. LEWIS, J. KEET

Mailing Address

3750 DUCHESS TRAIL

City

DALLAS, TX 75229

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

CONTRACTOR

Receipt For:

☒

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1 0 0 0 0 0

Date of Receipt

03 / 02 / 2012

Amount of Each Receipt this Period

1 0 0 0 0 0

Full Name (Last, First, Middle Initial)

B. GARCIA JONES, GUALBERTO

Mailing Address

8795 RALSTON RD #220

City

ARVADA, CO 80002

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

PERSONHOOD EDUCATION INC

Occupation

EXECUTIVE DIR.

Receipt For:

☒

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1 7 0 0 0 0

Date of Receipt

03 / 17 / 2012

Amount of Each Receipt this Period

1 7 0 0 0 0

Full Name (Last, First, Middle Initial)

C. MASON, KEITH

Mailing Address

8795 RALSTON RD #220

City

ARVADA, CO 80002

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

PERSONHOOD USA INC

Occupation

EXECUTIVE DIRECTOR

Receipt For:

☒

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1 7 0 0 0 0

Date of Receipt

03 / 14 / 2012

Amount of Each Receipt this Period

1 7 0 0 0 0

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1 2 9 0 0 0 0

1 2 9 0 0 0 0

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

PAGE 1 OF 2
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) PRO-LIFE SUPER PAC	FEC IDENTIFICATION NUMBER <div style="border: 1px solid black; padding: 2px;">C 0 0 5 1 3 6 9 7</div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee WAYNE ADVERTISING		Date <div style="border: 1px solid black; padding: 2px;">02 / 24 / 2012</div>
Mailing Address 2261 E 128TH AVE		Amount <div style="border: 1px solid black; padding: 2px;">9 8 9 4 8 5</div>
City THORNTON, CO 80241	State CO	Zip Code 80241
Purpose of Expenditure TELEVISION ADVERTISING	Category/Type <div style="border: 1px solid black; padding: 2px;">0 0 4</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: MI District:
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px;">9 8 9 4 8 5</div>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee ENDFALLOW MEDIA LLC		Date <div style="border: 1px solid black; padding: 2px;">02 / 27 / 2012</div>
Mailing Address 10386 RAVENSWOOD WAY		Amount <div style="border: 1px solid black; padding: 2px;">2 5 0 0 0 0</div>
City LITTLETON, CO 80130	State CO	Zip Code 80130
Purpose of Expenditure TELEVISION ADVERTISING	Category/Type <div style="border: 1px solid black; padding: 2px;">0 0 4</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: MI District:
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px;">2 5 0 0 0 0</div>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;">1 2 3 9 4 8 5</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature _____

Date

MM / DD / YYYY

12030811941

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

PAGE 2 OF 2
 FOR LINE 24 OF FORM 3X

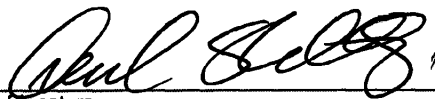
NAME OF COMMITTEE (In Full) PRO-LIFE SUPER PAC	FEC IDENTIFICATION NUMBER <div style="border: 1px solid black; padding: 2px;">C 0 0 5 1 3 6 9 7</div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee CHRISTIAN COMMUNICATION NETWORK		Date <div style="border: 1px solid black; padding: 2px;">02 / 28 / 2012</div>
Mailing Address 2020 PENNSYLVANIA AVE NW		Amount <div style="border: 1px solid black; padding: 2px;">3 3 5 0 0</div>
City WASHINGTON, DC 20006	State Zip Code	
Purpose of Expenditure ADVERTISING	Category/Type <div style="border: 1px solid black; padding: 2px;">0 0 4</div>	Office Sought: <input type="checkbox"/> House State: MI <input type="checkbox"/> Senate District: <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px;">3 3 5 0 0</div>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee		Date
Mailing Address		Amount
City	State Zip Code	
Purpose of Expenditure	Category/Type	Office Sought: <input type="checkbox"/> House State: <input type="checkbox"/> Senate District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;">1 2 7 2 9 8 5</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">1 7 8 9 3</div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px;">1 2 9 0 8 7 8</div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.


 Signature

Date

05 / 03 / 2012

12030811942

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

☐ Hand Delivered Date of Receipt

☒ USPS First Class Mail Postmarked
5/4/12

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Delivery Confirmation™ or Signature Confirmation™ Label ☐

☐ USPS Express Mail Postmarked

☐ Postmark Illegible

☐ No Postmark


☐ Overnight Delivery Service (Specify): Shipping Date
Next Business Day Delivery ☐

☐ Received from House Records & Registration Office Date of Receipt

☐ Received from Senate Public Records Office Date of Receipt

☐ Received from Electronic Filing Office Date of Receipt

☐ Other (Specify): Date of Receipt or Postmarked


PREPARER
(3/2005)

5/18/12
DATE PREPARED

12030811943